

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 1 OF 29  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Immigrant Voters Win PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00612820       </div>
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Morales, Francisco, , ,</b>			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y         </div>		
Mailing Address 6229 Bellota Dr Unit B			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           33.75         </div>		
City Las Vegas	State NV	Zip Code 89108	<b>Transaction ID : 24-01-00133-0002</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 06 / 2016         </div>		
Purpose of Expenditure Reimbursed Expenses - See Memos		Category/ Type	Name of Federal Candidate Clinton, Hillary , , ,		
		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: 00		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <b>Amazon.com</b> <b>[MEMO ITEM]</b>			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 07 / 2016         </div>		
Mailing Address 172 Trade St			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           33.75         </div>		
City Lexington	State KY	Zip Code 40511	<b>Transaction ID : 24-01-00133-00729</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 06 / 2016         </div>		
Purpose of Expenditure Ticket Roll and Fire Tablet		Category/ Type	Name of Federal Candidate Clinton, Hillary , , ,		
		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: 00		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">           33.75         </div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">           0.00         </div>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">           33.75         </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Young, Ryan, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 10 / 18 / 2016

Signature